

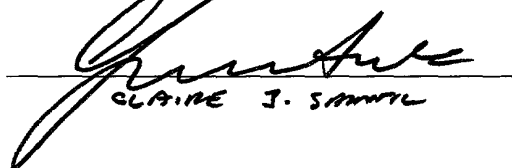
Modified PTO 1082  
For Other Than A Small Entity

Attorney Docket No. MIC-20

Applicant(s) : Pary Baluswamy et al.

For : PATTERN MASK WITH FEATURES  
TO MINIMIZE THE EFFECT OF ABERRATIONSEXPRESS MAIL CERTIFICATION"Express Mail" mailing label number EK708053255USDate of Deposit March 1, 2002

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to the Hon. Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202.

  
ELAINE J. SAMUELS

Hon. Commissioner for Patents  
Washington, D.C. 20231

TRANSMITTAL LETTER FOR  
ORIGINAL PATENT APPLICATION

Sir:

Transmitted herewith for filing are the ☒ specification; ☒ claims;  
☒ abstract; ☒ declaration; ☒ power of attorney; for the above-identified patent application.

Also transmitted herewith are:

☒ Five (5) sheets of:☒ Formal drawings.☐ Informal drawings. Formal drawings will be filed during the pendency of this application.

☒ An assignment of the invention to MICRON TECHNOLOGY, INC., a corporation of Delaware

☒ A check in the amount of \$40.00 to cover the recording fee.

☐ Please charge \$40.00 to Deposit Account No. 06-1075 in payment of the recording fee. A duplicate copy of this transmittal letter is transmitted herewith.

☐ An associate power of attorney.

☐ A certified copy of the priority document, \_\_\_\_\_ application, No. \_\_\_\_\_, filed \_\_\_\_\_.


The filing fee has been calculated as shown below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
BASIC FEE				\$ 740.00
TOTAL CLAIMS	60 - 20 = 40	x \$ 18	=	\$ 720.00
INDEPENDENT CLAIMS	2 - 3 = 0	x \$ 84	=	\$ .00
<input type="checkbox"/> A MULTIPLE DEPENDENT CLAIM		+ \$280	=	\$ .00
TOTAL				\$1,460.00

☒ A check in the amount of \$ 1,460.00 in payment of the filing fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge \$ \_\_\_\_\_ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

  
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